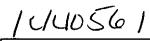
FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



OMB Number: 3235-0076

Expires: July 31, 2008 Estimated average burden hours per response . . . 16.00



## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC USE ONLY Prefix

Serial

UNIFORM LIMITED OFFERING EXEMPTION

DATE RECEIVED - DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indica	te change.)	,611 7 B 71110
CPI Capital Partners Asia Pacific II, L.P.		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE	Washington, DC
Type of Filing: ☑ New Filing ☐ Amendment		10A
A. BASIC IDENTIFICATION DA'	ГА	
1. Enter the information requested about the issuer		
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)		
CPI Capital Partners Asia Pacific II, L.P.		
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Ar	rea Code)
731 Lexington Avenue, 22nd Floor, New York, NY 10022	(212) 559-3580	•
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Ar	ea Code)
(if different from Executive Offices)		DDOOFF
Brief Description of Business		PROCESSED
real estate investment vehicle		N
Type of Business Organization		** JUL 2 4 2008
☐ corporation ☐ limited partnership, already formed	other (please specify)	):
□ business trust □ limited partnership, to be formed		THOMSON DELITEDS
Month	Year	WOWOOIA KEDIEKO
Actual or Estimated Date of Incorporation or Organization:	0 8 🛮 Actual 🔲	Estimated .
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	or State; F N	
CN for Canada; FN for other foreign jurisdiction)		

### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA								
2. Enter the information requested for the following:								
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>								
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> </ul>								
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
Each general and managing partner of partnership issuers.								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/Managing Pa								
Full Name (Last name first, if individual)  Cit Property Investors								
Business or Residence Address (Number and Street, City, State, Zip Code) 731 Lexington Avenue, 22nd Floor, New York, New York 10022								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Part								
Full Name (Last name first, if individual)  CPI Capital Partners Asia Pacific GP II Ltd.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
PO Box 309GT, Ugland House, South Church Street, George Town, Grand Cayman, Cayman Islands								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/o Managing Pa								
Full Name (Last name first, if individual)  Woolaver, Tim								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Property Investors, 731 Lexington Avenue, 22nd Floor, New York, New York 10022								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/o Managing Pa								
Full Name (Last name first, if individual)  Huber, Peter								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Property Investors, 731 Lexington Avenue, 22nd Floor, New York, New York 10022								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/o Managing Pa								
Full Name (Last name first, if individual)  Wofse, Fess								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Property Investors, 731 Lexington Avenue, 22nd Floor, New York, New York 10022								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/o Managing Pa								
Full Name (Last name first, if individual)  Astarita, Michael								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Property Investors, 731 Lexington Avenue, 22nd Floor, New York, New York 10022								
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/o								
Full Name (Last name first, if individual)  Johnson, Gage								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Property Investors, 731 Lexington Avenue, 22nd Floor, New York, New York 10022								

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### A. BASIC IDENTIFICATION DATA 3. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) May, Kaitlin Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Property Investors, 731 Lexington Avenue, 22nd Floor, New York, New York 10022 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ General and/or Managing Partner Full Name (Last name first, if individual) Kim, Tae-Hee Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Property Investors, 731 Lexington Avenue, 22nd Floor, New York, New York 10022 Check Box(es) that Apply: Promoter ☐ Executive Officer ☐ Beneficial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner □ Promoter ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner General and/or ☐ Promoter ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. I	NFOR	MATI(	ON ABO	OUT O	FFERI	NG				
1 L	Ios tho is	ouer sele	d or doo	e the ice	iar intan	d to noti	to non o	annaditad	Linuactor	e in this	offering	)		Yes	No ⊠
i. r	ias ine is	sucr son	ı, or uoc	S 111C 1551				dix, Colu							
2 1	1714 :- 41		<b>:</b>	4						_			,	\$ <u>10,00</u>	ለ ብብብ
						_									
3. E	Does the	offering	permit je	oint own	ership of	f a single	unit?				< +++ 1		1 <del></del>	Yes ⊠	No.
4. E	enter the imilar re ssociated lealer. If or that be	informa munerat d person more that roker or	ition req ion for s or agen an five ( dealer or	uested for the collection of a brown of the collection of the coll	or each por of pur oker or one oker be	person w chasers i dealer re	/ho has l in connec gistered	been or vection with with the	vill be pa h sales of SEC and	aid or gi f securiti /or with	ven, dire es in the a state o	ectly or indirect offering. If a r states, list that aler, you may	ctly, any con person to be ae name of th	listed e brol	is an ker or
Full N	•	st name f		,											
Busin	ess or Re	sidence /	Address (	Number	and Stree		tate, Zip			·					<del></del>
N					w York,	New Yo	rk 10013	3-2396			,··	.,			
Name	of Assoc	iated Bro	oker or D	ealer											
							olicit Pur								Stataa
(Chec.	K All St [AK]	ates or c	neck ind [AR]	(CA)	(CO)	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]	······ 🔼	All S	States
[IL]	[IN]	[IA]	[KS]	[KY]	(LA)	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WAJ	[WV]	[WI]	[WY]	[PR]			
Full N	ame (Las	st name f	irst, if inc	dividual)											
Busin	ess or Re	sidence A	Address (	Number	and Stree	t, City, S	tate, Zip	Code)	····						
Name	of Assoc	iated Bro	ker or D	ealer		<del></del>	_				<del></del>				
Manic	01 /13500	lated Die	okei oi D	carci											
							olicit Pur								· · · · · ·
(Chec	K All St	ates or c	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]	با	An a	siaies
[iL]	[N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full N	lame (Las	st name f	irst, if in	dividual)											
Busine	ess or Re	sidence /	Address (	Number	and Stree	t, City, S	tate, Zip	Code)							
															· · ·
Name	of Assoc	iated Bro	ker or D	ealer											
							olicit Pur		*******					All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[JA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	(TX)	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	"none" or "zero". If the transaction is an exchange offering, check this box \( \square\) and indicate in the columns belo securities offered for exchange and already exchanged.		
	Type of Security Aggregate Offering Price	Α	mount Already Sold
	Debt\$	\$_	
	Equity \$	\$_	
	Common Preferred	···	- *:
	Convertible Securities (including warrants)\$	\$_	
	Partnership Interests	\$_	365,150,000
	Other (Specify)-	\$_	
	Total\$ 3,000,000,000	\$_	365,150,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchase aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Number Investors	sed se	
	Accredited Investors5	<b>S</b> _	365,150,000
	Non-accredited Investors	\$_	
	Total (for filings under Rule 504 only)		
	Total (10) Things and of total 30 total	\$_	
3.	Answer also in Appendix, Column 4, if filing under ULOE.	\$_ the is:	suer to date i
3.			
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security	sify se	
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of	sify se	Courities by type  Dollar Amount  Sold
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security	sify se	Courities by type  Dollar Amount  Sold
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se	Courities by type  Dollar Amount  Sold
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se	Courities by type  Dollar Amount  Sold
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se  \$_ \$_ \$_ \$_ is officenting	Courities by type  Dollar Amount  Sold  ering. Exclude
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se  \$_ \$_ \$_ sis officentin	Courities by type  Dollar Amount Sold  ering. Excludengencies. If the
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se  \$_ \$_ \$_ sis officontin  \$_ \$_	Courities by type  Dollar Amount Sold  ering. Excludengencies. If the
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se  \$_ \$_ \$_ s_ is officentin  \$_ \$_	Courities by type  Dollar Amount Sold  ering. Excludengencies. If the
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in the amounts relating solely to organization expenses of the issuer. The information may be given as subject to future amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs	\$ \$ \$ is officontin \$ \$ \$	Courities by type  Dollar Amount Sold  ering. Excludengencies. If the
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se  \$ \$ s is officontin  \$ \$ \$ \$ \$ \$	Courities by type  Dollar Amount Sold  ering. Exclude agencies. If the (1)  (1)
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se  \$_ \$_ \$_ sis officontin  \$_ \$_ \$_ \$_ \$_ \$_ \$_ \$_ \$_	Courities by type  Collar Amount Sold  ering. Exclude agencies. If the (1) (1) (1)
	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Clas listed in Part C-Question 1.  Type of Offering  Type of Security  Rule 505	sify se  \$_ \$_ \$_ is offi contin  \$_ \$_ \$_ \$_ \$_ \$_ \$_ \$_	Courities by type  Collar Amount Sold  ering. Exclude agencies. If the (1) (1) (1)

Michael Astarita	By: Michael Astarita, Director						
Name of Signer (Print or Type)	CPI Capital Partners Asia Pacific	CPI Capital Partners Asia Pacific GP II Ltd., as General Partner					
<del></del>	Title of Signer (Print or Type)	السوا					
CPI Capital Partners Asia Pacific II, L.P.	will (805)	July 15 ,	2008				
Issuer (Print or Type)	Signature	Date:					
The issuer has duly caused this notice to be signe following signature constitutes an undertaking by request of its staff, the information furnished by the	d by the undersigned duly authorized person the issuer to furnish to the U.S. Securities a	ind Exchange Commiss	ion, upon written				
	D. FEDERAL SIGNATURE						
	ed)						
<del>-</del> •			⊔ ¥ <u></u>				
• •							
<u>-</u> .							
offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of another issuer		<b>□</b> €				
Construction or leasing of plant building	gs and facilities	🗆 <b>\$</b>	□ \$				
Purchase, rental or leasing and installati	🗆 \$	□ \$					
Purchase of real estate		🗆 \$	<b>■</b> \$2,998,500,00				
Salaries and fees		_					
2 k - Townson, Market and the second recovery the residence of the second second	majangan kawa aya ka ka ka ka masa ka	Officers,	Payments To-				
	to the issuer set forth in response to Part C-	Payments to Officers,	Payments To				

